JAN 2 3 2012

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information							
a. Full Name		7 May 200 May	c. ID Number				
Campaign to Elect Robynn Spence Cleck of Court  b. Mailing Address (include City, State and Zip Code)  d. Date Filed							
b. Mailing Address (include City, Stat	d. Date Filed						
150 Mary's La	1-23-12						
Ruther fordten,	e. Phone Number						
2 D 4 W 12			828-245-3076				
2. Report Year 3. Period Start	Date (mm/dd/yy) 4. Period	End Date (mm/dd/yy) 5. Treasur	rer Full Name				
2011 07/01/	2011 12/3		[일어] 나 [하는 ] [하는 ]				
6. Type of Committee (Check C		port (check only one type of rep					
Candidate Campaign Part		State/County	Referendum				
	erendum Organization		Organizational				
Legal Expense Fund	t Fundraiser	·  _ ` '	Pre-referendum				
Legal Expense Fund	Pre-primary	First	Final				
7. Type of Fund (if applicable,	check one) Pre-election	Second	Supplemental Final				
Booster Fund	Semi-annual	Third	Annual				
Building Fund	Mid Ye	- · · · · · · · · · · · · · · · · · ·	☐ Special				
Banking runo	Year En		10.0				
Other:	Final	<b>二</b> ,	10. Special Report Name				
8. Number of Fundraisers this		Year End					
o. rumber of Fundraisers this	Report	Final					
		☐ Special					
11. Account Information		11. Account Information					
a. Financial Institution Full Name		a. Financial Institution Full Name					
First NAtion.							
b. Purpose	c. Account Code	b. Purpose	c. Account Code				
			1				
	I D. C. ID. C. D. I	4					
	d. Period Begin Balance	-	d. Period Begin Balance				
	\$ 345 4		\$				
CERTIFICATION							
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.							
report is complete, true and correct	and that I have been trained by	y the NC State Board of Elections.					
DAVID L. K	eno Wa	vid I Kono	1-23-12				
Printed Name of Signer Signature of Appointed Treasurer Date							
FOR OFFICE USE ONLY							
Date Received:	[33/3 Emplo	yee: De	livery Method Normal Mail				
Date Postmarked: Employee: Registered Mail  Hand Delivered							
Date Scanned: Employee: Employee:							
Date Data Entered:	Employ		Signer has not received mandatory training				
Please Note: This form car	nnot be used to amend comm	nittee information such as the con	nmittee address, treasurer,				
assistant treasurer, custodian of books information, or account information.							
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.							

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment ☐ Yes ⊠ No

1. Committee Full Name (and Fund if applicable)	2. Type of	Report	3. ID Number
CAMPAIGN to Elect RobyNN Species Clerk et Colet	Jeni	ANNUAL AL END	
Start of Election Cycle: January 1, <u>2010</u>		Total this Reporting Period	Total this d Election Cycle
4) Cash on Hand at Start		\$ 345.11	\$ 938.10
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$ 910,00
6) Contributions from Individuals	(CRO-1210)	\$	\$ 141017.72
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	lld and lle)	\$	\$ 15527.73
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 3000	\$ 15313.99
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$ 1106.73
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5, 16 and 17)	\$ 30000	\$ 110420.72
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 4511	\$ 45.11
ADDITIONAL INFORMATION	61 651.2		PAN ARTISTA SATTA CALIFORNIA SA
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
	(CRO-1430)	\$	
	(CRO-1610)	\$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	
	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
	(CRO-1440)	\$	\$
	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

T . I		
Dist	oursements	2
		•

ramoverer		_	102002000320			100	Amendment	t
JAN	2	3	2012	Pg	 of	_/_	☐ Yes	→ No
								1

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable) 2. ID Number								
Campaign	to Elect Roll	YNN Spen	oce C	leck o	t Count			
3. Type of Disb					each type of Dist	bursement.)		
Operating Exp		ntributions to Candida		Maria de la companya		ordinated Party Expenditures		
4. Payee Inforn	nation			Add	Remove			
a. Full Name, M	failing Address & Ph	one		b. Coordinat	ted Committee Name	e d. Comments		
(include city, state,								
MARINE CORP # 1221 c. Level Registered (Specify)								
7 2 4 County:								
2 7	ality: e. Election Sum to Date							
Rotherstondton, N.C. 28139 State Municipality: e. Election Sum to Date								
	<u> </u>							
f. Account Code	g. Form of Payment	h. Purpose Code	1	mm/dd/yyyy)	66)	k. Required Remarks		
	Check	"0"	09/1	2/2011	\$ 100-	Donation -		
				7	\$			
4. Payee Inforn	nation			Add $\square$	Remove			
THE CONTROL AND ADDRESS OF THE PERSON	ing Address & Phone				ed Committee Name	e d. Comments		
(include city, stat				7.7		a comment		
21 11	Same							
1-094,000	Spence lary's Lanc 2 fordton,			c. Level Regis	stered (Specify)			
150 NI	larys LANC	90 8070 19 <u>11.2</u> 702		Federal	✓ County:			
Dother	2 fordton,	N.C. 28	139	State	☐ Municipa	dity: e. Election Sum to Date		
020-7	288-4656	THE STATE OF THE S	1000000			\$ 5m -		
		L. D. Code	I. s		I	000		
f. Account Code		h. Purpose Code	1	nm/dd/yyyy)		k. Required Remarks		
	EFT	"0"	09/2	2/2011	\$ 10000	Mistake		
					\$			
4. Payee Inform	nation			Add	Remove			
a. Full Name, Maili	ing Address & Phone			b. Coordinate	ed Committee Name	d. Comments		
(include city, stat	e, & zip)							
Robusta	50-100							
150900	o pesse	_			stered (Specify)			
130 11	lary 5 Lance	701	70	Federal	County:			
Kotha	Spence lary's Lare fordton, N	J.C. 2813	37	State	☐ Municipal	lity: e. Election Sum to Date		
828-2	288-4656	)				\$ 500		
		h. Purpose Code	i. Date (n	nm/dd/yyyy)		k. Required Remarks		
	EFT	"() "	11/7	0/2011	\$ 10000	Mistake		
		Ŭ	/-	1	\$	1111311		
					2			
5. Total only this Page \$ 300°								
6. Total of ALL CRO-1310 Pages								
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)								
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)								
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								
7. Purpose Codes (List detailed expenditure code in (h.) above)								
A* - Media B* - Printing C* - Fundraising D - To Another Candidate								
E - Salaries	F* - Equipn			itical Party		olding Public Office Expenses		
I - Postage O* Other	J - Penaltie	S	K* - Of	ffice Expens	ses Q* - Do	onation to Legal Expense Fund		
	a datailed avalenation			C*-1-1 (1-)				
* Codes require detailed explanation in required remarks field (k)								